

Remarks

This is in response to the final Office Action mailed on March 23, 2004. Claims 1-10 and 12-25 remain pending. Reconsideration and allowance are respectfully requested in view of the following remarks.

I. Claim Rejections - Molina

Claims 1-6, 10, 12, 14-18, 20, and 23-25 were rejected under 35 U.S.C. § 102(b) as being anticipated by Molina, U.S. Patent No. 5,897,586. This rejection is respectfully traversed for at least the following reasons.

The rejection apparently equates "resynchronizing a contraction of the heart" with "defibrillation." However, it is respectfully suggested that the term "resynchronization" as used in the present application has a meaning that is distinct from that of defibrillation.

For example, cardiac resynchronization therapy is a chronic treatment for heart failure patients that helps to restore normal coordination of the walls of the heart during contraction to thereby improve hemodynamic efficiency. See the example description of cardiac resynchronization therapy attached at the Appendix hereto; see also page 2, lines 1-16 of the present application. In contrast, defibrillation involves the termination of an erratic heart rate through delivery of a high-energy electrical shock. See the example description of defibrillation provided at the Appendix hereto.

Claim 1 recites a method including, among other limitations, resynchronizing a contraction of the heart through linear excitation of the surface. Molina fails to disclose or suggest such a method.

Claim 10, as well as claims 12, 14-18, and 20 that depend therefrom, are directed to an apparatus to resynchronize a heart including a linear source. Although not identical in scope to claim 1, claim 10 includes limitations similar to those described above with respect to claim 1 and should therefore be allowable for at least similar reasons.

Claims 23 and 24, as well as claim 25 that depends from claim 24, include limitations similar to those described above with respect to claim 1 and should therefore be allowable for at least similar reasons.

Reconsideration and allowance of claims 1-6, 10, 12, 14-18, 20, and 23-25 are therefore respectfully requested in view of the above remarks.

II. Claim Rejections - Knisley

Claims 1-10, 12-14, 17-22, 24, and 25 were rejected under 35 U.S.C. § 102(b) as being anticipated by Knisley, U.S. Patent No. 5,824,028. This rejection is respectfully traversed, and reconsideration is requested for at least the following reasons.

Similar to the remarks provided above with respect to Molina, Knisley fails to disclose or suggest resynchronization and is therefore inapplicable to independent claims 1, 10, and 24. Claims 2-9, 12-14, 17-22, and 25, which all depend from claims 1, 10, and 24, further distinguish over Knisley. Reconsideration and allowance of claims 1-10, 12-14, 17-22, 24, and 25 are therefore respectfully requested.

III. Conclusion

The remarks set forth above provide certain arguments in support of the patentability of the pending claims. There may be other reasons that the pending claims are patentably distinct over the cited references, and the right to raise any such other reasons or arguments in the future is expressly reserved.

In view of the above amendments and remarks, all claims are in condition for allowance. Favorable reconsideration in the form of a Notice of Allowance is respectfully requested. Please contact the undersigned attorney with any questions regarding this application.

Respectfully submitted,
MERCHANT & GOULD P.C.
P.O. Box 2903
Minneapolis, Minnesota 55402-0903
(612) 332-5300

Date: June 22, 2004

By: Robert A. Kalinsky
Name: Robert A. Kalinsky
Reg. No.: 50,471
RAK

Attachment: Appendix

Appendix

Attached hereto are the following:

- an example description of "cardiac resynchronization therapy" located at http://www.guidant.com/webapp/emarketing/compass/comp.jsp?lev1=living&lev2=crt_faq; and
- an example description of "defibrillation" located at <http://www.guidant.com/webapp/emarketing/compass/comp.jsp?lev1=resourc&lev2=glossary#D>.

Heart Disease, Cardiovascular Disease Resources

Defibrillation

The termination of a fast, erratic, and often fatal heart rate by delivering a high-energy electrical shock to restore the heart's normal rhythm. A shock is administered through electrodes placed on the chest (external defibrillation) or in the heart (internal defibrillation).

06/22/2004

<http://www.guidant.com/webapp/emarketing/compass/comp.jsp?lev1=resource&lev2=glossary>

JUN-22-04

12:07PM

FROM-Merchant & Gould

6123329081

T-719 P.007/007 F-268

What is cardiac resynchronization therapy (CRT)?

Cardiac resynchronization therapy (CRT) is one treatment option for some heart failure patients. CRT uses electrical impulses to help your heart pump more effectively.

In a healthy heart, the chambers contract and relax in a coordinated way, or in *synchrony*. Heart failure can cause problems with the timing or coordination of your heart's contractions — especially in the ventricles (lower chambers). In other words, it can cause *dysynchrony*. When your heart's contractions are not coordinated, your heart may not deliver enough blood to your body. Without enough blood, important organs like your brain and kidneys cannot function properly. (Learn more about the [heart chambers](#).)

A CRT device can help restore normal coordination, or *synchrony*. The device uses leads (insulated wires threaded into the heart) to deliver small electrical impulses to the ventricles. The impulses help your ventricles contract at the same time, or "resynchronize." When your ventricles pump together, your heart can work more efficiently to help your body get the blood it needs to live and work.

CRT is sometimes called "biventricular pacing." And a CRT device is sometimes called a biventricular pacemaker or a cardiac resynchronization therapy pacemaker (CRT-P).